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Bib Data Sheet

CONFIRMATION NO. 6574

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| SERIAL NUMBER 10/031,607 | FILING DATE 06/12/2002 RULE | CLASS 435 | GROUP ART UNIT 1641 | ATTORNEY DOCKET NO. 2786-0199P |
| APPLICANTS Kinneret Savitzky, Tel Aviv, ISRAEL; Rami Khosravi, Herzilya, ISRAEL; Menashe Elazar, Mevaseret Zion, ISRAEL; <i>OK FH 02/15/05</i> | | | | |
| ** CONTINUING DATA * This application is a 371 of PCT/IL00/00427 07/19/2000 <i>OK FH 02/15/05</i> | | | | |
| ** FOREIGN APPLICATIONS * ISRAEL 130989 07/20/1999 | | | | |
| ** SMALL ENTITY ** | | | | |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Flt 02/15/02</i> Acknowledged <i>Examiner's Signature</i> Initials | STATE OR COUNTRY ISRAEL | SHEETS DRAWING 12 | TOTAL CLAIMS 25 | INDEPENDENT CLAIMS 2 |
| ADDRESS 2292 | | | | |
| TITLE Splice variants of cd40-receptor | | | | |
| FILING FEE RECEIVED 582 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |